PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09740053

		CLAIMS AS	S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			Q		7× •		Γ	RATE	FEE)	RATE	FEE	
FOR			NUMBER FILED		NUMB	SER EXTRA	E	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			9 minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		*			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, ente	"0" in column 2		L	TOTAL		OR	TOTAL	710.00	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY (OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· /3	Minus	2	0	=		X\$ 9=		OR	X\$18=		
	Independent	TATION OF MI	Minus	*** SENIDENI	3	=		X40=		OR	X80=		
	TINOT FRESE	NIATION OF IN	DETIFIE DEF	LINDLIN	I CLAIIVI			+135=		OR	+270=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	_	DD(1).1 CE		• .			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AINA	=		X40=		OR	X80=		
<u> </u>	FIRST PRESE	NTATION OF MI	DLIIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=		
							L Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AIR A]=		X40=		OR	X80=		
_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	LOLAIM	,	\	+135=		OR	+270=	-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ber Previously Pai					r foun	d in the app	ropriate box	in co	lumn 1.		